### STATE OF MAINE



## COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Office: 242 State Street, Augusta, Maine Tel: (207)287-4179 Website: www.maine.gov/ethics

# STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seq.

# COVERING THE CALENDAR YEAR JANUARY 1, 2005 THROUGH DECEMBER 31, 2005

	FULL NAME:		Please check the appropriate box and fill in the District number.	
MAIL	ING ADDRESS:			
	CITY:		Member of the Senate, District	
	ZIP CODE:			
PHO	ONE NUMBER:		Member of the House, District	
	GENERAL INSTRUCTION	ONS		
1.	Please file this statement with the Clerk of the House or the Secreta	ary of the S	Senate by:	
	5:00 p.m. on February 15	<u>5, 2006</u> .		
2.	The report covers you, your spouse, and your dependent children.			
3.	Report only specific sources of income. Dollar amounts need not be listed.			
4.	Campaign contributions duly recorded as required by law need not be reported in this statement.			
5.	Attach additional sheets if needed. Label attachments with your name, address, and the date.			
6.	Please sign on Page 4.			
7.	State law (1 M.R.S.A. § 1018) requires Legislators to file an update any change to the information relating to the preceding year. Addit Legislators to make a supplementary statement to the Commission incurred.	itionally, tl	ne law (1 M.R.S.A. § 1016-B (2)) requires	
	PLEASE KEEP A COPY OF THIS STATEMI	ENT FOR	YOUR FILES.	
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

**PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER.** Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

Name of Employer		Principal Type of Economic
	Address	Activity of Employer
Enter the name and address of yo		ators who are self-employed.) of economic activity from which you derive similar business entity, list the major areas of
ame and Address of Business Entity	Major Areas of Economic Activity	Major Areas of Economic Activity
and the recess of Business Emily	(self)	(partnership, association or
	` ,	similar business entity)
	economic activity of the entity or person f	r an established code of professional ethics, rom whom the income was derived.
		Principal Type of Economic Activity
F.C	A 11	of Entity or Person Who Is the
me of Source	Address	Source of Income
RT III. MAJOR AREAS OF PRA	ACTICE. (For Legislators who are attorn	
ART III. MAJOR AREAS OF PRA		
ART III. MAJOR AREAS OF PRA	ACTICE. (For Legislators who are attorn list the major areas of practice of your firm	1.
RT III. MAJOR AREAS OF PRActice. If associated with a law firm,	ACTICE. (For Legislators who are attorn list the major areas of practice of your firm Major Areas of Practice	n.  Major Areas of Practice
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Name of Source	Address	Kind of Income
1. <u> </u>		
	uring the reporting period, and list the major	names of creditors for any unsecured loans of or areas of economic activity of each creditor. Do
Name of Creditor	Address of Creditor	Principal Type of Economic  Activity of Creditor
1		
PART VI. DISCLOSURE OF	GIFTS. Name the specific source of each	n gift of more than \$300. Include gifts with an
	from a single source. If none, so state.	
	3	
2	4	
PART VII. DISCLOSURE OF related to your official duties. If no		honoraria accepted for appearances or speeches
1	3	
2	4	
	ON BEFORE STATE AGENCIES. Ider for compensation of any amount. If none, so	ntify each executive branch agency before which is state.
1	3	
2	4	
	-3-	
		e branch agency to which you or a member of during the reporting period. If none, so state.
1	2	

## PART X. INCOME RECEIVED BY MEMBERS OF IMMEDIATE FAMILY.

List the type of economic activity representing each source of income of \$1,000 or more received by your spouse or dependent child(ren) during the reporting period and the kind of income represented. Do not include gifts. Indicate (S) beside sources of income received by spouse and (D) beside sources of income received by dependent(s).

Type of Economic Activity Representing Each Source of Income Received	Kind of Income
1	
2	
3	
4	
· · · · · · · · · · · · · · · · · · ·	
**********	****************
appears that a Legislator has willfully filed a fa Attorney General. If the Commission determin statement or has willfully filed a false statemen interest on every question and shall be preclude branch of the Legislature, and shall not attemp	be a Class E crime. If the Commission concludes that it also statement, it shall refer its findings of fact to the nest hat a Legislator has willfully failed to file a required t, the Legislator shall be presumed to have a conflict of ed from voting on any question in committee or in either at to influence the outcome of any question. A Legislator is subject to a civil penalty not to exceed \$1,000, payable to (I.R.S.A. § 1019)
Signature	
Signature	Date

### STATEMENT OF SOURCES OF INCOME

### **DEFINITIONS AND INSTRUCTIONS**

Please contact Commission staff at 287-4179 or come to the Commission office at 242 State Street, Augusta, if you have any questions about this form, your reporting requirements, or how to report specific situations. The staff will be glad to assist you in completing this form accurately and properly.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. "Employee" means a person in any employment position, including public or private employment, employment with a nonprofit, religious, charitable or educational organization, or any other compensated service under an expressed, implied, oral or written contract for hire, but does not include a self-employed person. Do not include sources of income received by your spouse or dependent child(ren) in this section. Include sources of income from both full and part-time employment, if applicable. Name each employer from whom you received compensation for services, including fees, commissions and payments in-kind. A typical report would look like this:

Name of Employer

Address

Address

Activity of Employer

1. Jordan Brothers

201 Main Street, Pinetree City

Retail trade, apparel

2. Central Medical Center Waterville, Maine Healthcare

**PART II. INCOME DERIVED FROM SELF-EMPLOYMENT.** If you derive part of your income from self-employment and part from employment by another, complete both Parts I and II of this form. You are considered self-employed if you perform services for another under contract, but are not under the essential control or supervision of the other person while performing those services.

**SECTION A.** A typical report would look like this:

Name and Address of Business Entity

Major Areas of Economic Activity
(self)

Major Areas of Economic Activity
(firm)

Sharpner & Howe Accounting Financial Planning
65 Lincoln Street Tax Preparation
Canton, Maine Accounting

**SECTION B.** If no source contributes more than \$1,000, you need not report. The following are typical entries:

Name of Source

Address

Principle Type of Economic Activity of Entity
or Person Who is the Source of Income

1. Southern Railways598 Washington Ave., Conway, MATransportation2. Eastern Paper58 Lake Street, Bangor, MainePapermaking

**PART III. MAJOR AREAS OF PRACTICE.** (For attorneys-at-law only.) For purposes of this section, "major" is defined to mean any area of practice from which the individual and/or the partnership derived income of more than 20 percent in the aggregate during the preceding year. A typical report would look like this:

Name and Address of Firm Major Areas of Practice (self) Major Areas of Practice (firm)

Smith & Jones Probate/Wills Personal Injury
28 Hollywood Drive Workers' Compensation
Raymond, Maine Probate/Wills

**PART IV. OTHER SOURCES OF INCOME.** Do not list sources of income in this part that were listed in Parts I, II, and III of this form. "Income" means economic gain to a person from any source, including, *but not limited to:* 

-Gains derived from property transactions

-Rents and royalties

-Income from investments including interest, capital gains, and dividends

-Annuities

-Income from life insurance and endowment contracts

-Pensions

-Income from discharge of indebtedness

-Distributive share of partnership income

-Income from an interest in an estate or trust

-Prizes and grants

*In-kind income includes, but is not limited to, the transfer of property and options to buy or lease, and stock certificates. Income does not include gift or alimony and separate maintenance payments.* A typical report would look like this:

Name Address Kind of Income

1. Brighton Telephone2 Blake Street, Boston, MAInvestment2. Eternal Life Insurance Company9 School Street, Watertown, MAAnnuity

PART V. DISCLOSURE OF REPORTABLE LIABILITIES. This section is used to report and <u>update</u> any reportable liability. Please remember that the law requires that these liabilities be reported to the Commission within 30 days of their occurrence. Do not list amounts owed. "Relative" means an individual who is related to the Legislator or the Legislator's spouse as father, mother, son, daughter, brother, sister, uncle, aunt, great aunt, great uncle, first cousin, nephew, niece, husband, wife, grandfather, grandmother, grandson, granddaughter, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepson, stepdaughter, stepbrother, stepsister, half brother or half sister, and shall be deemed to include the fiancé or fiancée of the Legislator. "Reportable liability" does not include a credit card liability; an educational loan made or guaranteed by a governmental entity, educational institution, or nonprofit organization; or a loan made from a state or federally regulated financial institution for business purposes. A typical report would look like the model shown in Part I, substituting for the employer, the name, address and principal economic activity of the creditor.

**PART VI. DISCLOSURE OF GIFTS.** A gift is defined as anything of value, including forgiveness of an obligation or debt, given to a person without that person providing equal or greater consideration to the giver. "Gift" does not include:

- 1. Gifts received from a single source during the reporting period with an aggregate value of \$300 or less;
- 2. A bequest or other form of inheritance;
- 3. A gift received from a relative; and
- 4. A subscription to a newspaper, news magazine, or other news publication.

**PART VII. DISCLOSURE OF HONORARIA.** "Honorarium" means a payment of money or anything with a monetary resale value to a Legislator for an appearance or a speech by the Legislator. Honorarium does not include reimbursement for actual and necessary travel expenses for an appearance or speech, or payment for an appearance or a speech that is unrelated to the person's official capacity or duties as a member of the Legislature.

**PART VIII. REPRESENTATION BEFORE STATE AGENCIES.** Identify each state agency or authority before which you appeared for, represented, or assisted another in a matter before that state agency or authority, and indicate any compensation received.

**PART IX. BUSINESS WITH STATE AGENCIES.** "Immediate family" means a Legislator's spouse or dependent child(ren).

**PART X. INCOME RECEIVED BY MEMBERS OF IMMEDIATE FAMILY.** Names and addresses of sources of income need not be listed in this section. List only the type of economic activity representing each source of income derived by your spouse or dependent child(ren) and the kind of income represented. For the purposes of this statement, a dependent child is one for whom an exemption is claimed when filing a Federal income tax return. Refer to Part IV of instructions for a partial listing of sources of income. A typical report would look like this:

Type of Economic Activity Representing
Each Source of Income Received

Kind of Income

1. Education services (teacher) (S)

**Employment** 

2. Insurance (S)

Dividends